

MEDICAL RECORD - NURSING CARE PLAN

For use of this form, see AR 40-66; the proponent agency is the OTSG

INSTRUCTIONS: Number and initial each recording.

1. Date Identified	2. RN Initials	3. #	4. Problems	5. Expected Outcomes (Goals)	6. Date Accomplished Revised

(Continue on Reverse.)

5. Discharge Considerations.

6. Patient Identification. *(For typed or written entries give: Name - last, first, middle; grade; date; hospital or medical facility)*

